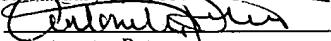


UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: MORIWAKI et al.
 Serial No.: 10/551,898 Docket: 10873.1788USWO
 Filed: October 4, 2005
 Title: MEDICAL NEEDLE DEVICE WITH WINGED SHIELD
 (AS AMENDED)

CERTIFICATE UNDER 37 CFR 1.8:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, with sufficient postage, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on January 3, 2005.

By: 
 Name: Antonette Peters

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 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

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 PATENT TRADEMARK OFFICE

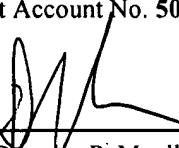
Commissioner:

The following papers are transmitted herewith:

- Transmittal Sheet in duplicate containing Certificate of Mailing
- Communication regarding Submission of Missing Requirements
- Signed Combined Declaration and Power of Attorney
- Check in the amount of \$130 for Submission of Missing Requirements
- Information Disclosure Statement, Form 1449, 6 references
- Other: Preliminary Amendment, marked-up Specification, clean Specification
- Return Postcard

Please charge any additional fees or credit overpayment to Deposit Account No. 50-3478. A duplicate of this sheet is enclosed.

Hamre, Schumann, Mueller & Larson, P.C.
 P.O. Box 2902-0902 Minneapolis, MN 55402
 612.455-3800

By: 
 Name: Douglas P. Mueller
 Reg. No. 30,300
 Initials: DPM/acp

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S/N 10/551,898

PATENT

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SUBMISSION OF MISSING REQUIREMENTS

Mail Stop PCT
Commissioner for Patents
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Alexandria, VA 22313-1450

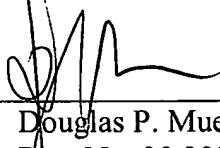
Dear Commissioner:

In connection with the above-identified application, enclosed please find the originally signed Combined Declaration and Power of Attorney. Please find enclosed check in the amount of \$130.00 to cover the Missing Requirements completion fee.

Respectfully submitted,

HAMRE, SCHUMANN, MUELLER &
LARSON, P.C.
P.O. Box 2902-0902
Minneapolis, MN 55402-0902
(612) 455-3800

Dated: January 3, 2005

By: 
Douglas P. Mueller
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